

Patient has been treated by suspension, baths, nitrate of silver, "point de feu" along the vertebral column, but without any benefit.

The following case is given by Fraser: A. K., newspaper carrier, aged 30 years. When seen for the first time by the author, in 1869, he staggered like a drunken person. *Debut* in childhood; disease came on gradually. First symptom noticed, an uncertainty in the gait. At the age of seven years the staggering became more persistent; child was taken from school. In 1875 an attack of typhoid fever, from which made good recovery. In 1876, was obliged to abandon occupation; would often fall headlong when about his work; had to lean against objects for support.

Typical appearance.—Marked titubation; body bent forward; head thrown backward; oscillates continually, as though it was too heavy. The eyeballs are the seat of oscillation without true nystagmus; generally turned up and to one side; internal strabismus of right eye; articulation of words slow, guttural, hesitating. When in a sitting position, no trembling nor choreiform movements, except of the head; intentional trembling when he attempts to write; has some difficulty in touching the tip of his nose when eyes are shut; Romberg sign absent. Patient died of tuberculosis June 11, 1879.

Autopsy.—Pulmonary phthisis, cavities; pneumothorax; liver, kidneys, spleen amyloid; cerbrum and cord normal; the cerebellum is very small, and is only half the normal size, 81 grammes instead of 160 grammes. Section shows the white substance apparently normal, but gray matter diminished in thickness; deep vacuoles in the fissures, and representing little cysts of the pia mater; Purkinje's cells diminished in number, extending to less than the normal depth; nuclei absent.

A sister, aged 24 years, of the above patient, is similarly affected. The same clinical picture; onset in childhood; can no longer write; difficulty in walking; is afraid that she will fall on her face; the act of reading is very fatiguing; for four years has not dared to go out alone; eyes oscillate; fixation painful; internal strabisms of right eye during the convergence of the eyes; pupils sluggish; no achromatopsia; speech slow, hesitating; no mental trouble. On lying down, when she places her head on a horizontal plane, she has vertigo, says that there are flashes in her eyes, and that she can no longer see the clock before her. At this moment she does not dare to turn her head and has a sensation of nausea.

Ophthalmoscopic examination of both patients by Dr. Read: Papillæ pale, irregular in their contour, with veins engorged in certain points; arteries contracted; opaque and thick aspect of the choroid.

Family and hereditary data.—The father healthy, but given to drink; a maternal aunt feeble-minded; nine children, five are dead; two of convulsions, one of phthisis; the brother above mentioned was the last; one of the living sisters, married, had convulsions in childhood, and has lost an infant with meningitis.

To sum up: These two cases present a sufficiently clear clinical picture. Inco-ordination of upper and lower extremities, dating from infancy; paresis of right external rectus; commencement of papillary atrophy; troubles of speech; instability of the eyeball, without true nystagmus; staggering gait, and propensity to fall forward; atrophy of cerebellum; diminution in thickness of the gray substance with cysts of the pia mater; diminution in number of the cells of Purkinje; alteration of these structures in form, and of the surrounding stroma.

HURD.

Cerebral Hæmorrhage as a Sequel of Enterocolitis.—Emerson (*Medical Record*, April 20, 1895), reports the case of a child, five months old, who had been fed for six weeks on sterilized milk and most of that time had suffered from more or less diarrhœa. After this the food was changed several times, but the stools continued loose, and

at one time were streaked with mucus and a little blood. There was also a slight daily fever with evening exacerbation. Under treatment the child seemed to be improving, when suddenly it became hemiplegic on the left side. Two hours and a half later it commenced to move in the entire left side, but a second attack followed and terminated fatally. The author says that the literature on hemiplegia as a sequel to enterocolitis is very meagre. Keating finds in eighty-three cases of hemiplegia, one due to this cause, but taking the element of scurvy into consideration, we would expect a hæmorrhagic effusion into any of the closed cavities as a result of malnutrition and a weakening of the vascular walls. Two such cases were reported during the summer of 1894. This the author believes to have been the case here, and that the child's milk was impaired in its digestibility by sterilization, whether by converting the soluble proteids into insoluble, by straying the ferment or by emulsifying the fat, he does not know, but considers that a complex fluid as unstable as milk cannot be subjected to continuous heat without detriment to its nutritive properties, except as a temporary measure.

FREEMAN.

Puerperal Neuritis.—Bernhardt (*Centralblatt für innere Medizin*, March 9, 1895). A woman, twenty-nine years old, experienced pain in the right shoulder immediately after her third parturition. This was followed by emaciation of the hand, especially of the interosseal muscles and ball of the thumb. At the same time numbness of the little finger and the ulnar side of the forearm appeared. Adduction and abduction of the fingers and movements of the thumb were very feeble. In the course of the median and ulnar nerves, the middle form of the reaction of degeneration was found.

In a second patient a neuritis of the left peroneal developed. In a third case, a woman thirty-one years old claimed to have suffered pain in the right shoulder since her eighteenth year. After her first confinement the pain involved the entire right arm, but again disappeared. After the birth of her last child she was said to have suffered for four months, with fever and a bloody discharge, and from this time dates her present complaints. An investigation revealed a neuritis of the right median or ulnar nerves with moderate form of the reaction of degeneration and atrophy of the affected muscles.

FREEMAN.

Contribution to the Experimental Study of the Nervous Manifestations of Chronic Arsenical Poisoning.—Beco (*Centralblatt für innere Medizin*, April 6, 1895). Two guinea pigs, three rabbits and two dogs were given subcutaneous injections of Fowler's solution in increasing doses. The two guinea pigs lived eight and fifteen days, the three rabbits one, one and one-half and two months, the two dogs two and three months. The symptoms observed were a conjunctivitis, trophic changes in the skin, and increasing loss of strength. Death took place with progressive cachexia. The spinal cord and nerves, and the cutaneous and muscular nerves were found intact.

FREEMAN.

Bulbar Manifestations in Syringomyelia.—Raymond (*Gazette des Hôpitaux*, March 19, 1895). Bulbar manifestations are quite frequent in the course of syringomyelia. It is more rare for this disease to begin with bulbar manifestations. Exceptionally these assume the form of an apoplectiform attack. The observation of Cohen, an American author, is unique of its kind. It appears that syringomyelia can assume the pure bulbar form. In Cohen's case the symptoms were, ptosis on the right side, inequality of the pupils and an inferior bilateral facial paralysis. Naturally the bulbar manifestations of syringomyelia may be associated with all the clinical varieties of this disease.

FREEMAN.

Exhibition of Three Microcephalic Children.—Laborde (*La Méd. Mod.*, 5 Année, No. 95), presented before the Academy of